Case 20-20319-MBK Doc 38 Filed 03/08/22 Entered 03/08/22 14:49:08 Desc Main Document Page 1 of 7

Fill in th				
Debtor 1	Jennifer A. Mitch	ell		
	First Name	Middle Name	Last Name)
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	nkruptcy Court for the:	DISTRICT OF NEW JE	RSEY, TRENTON DIVISION	
_	3:20-bk-20319			
(if known)				☐ Check if the amended

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct

Pa	t 1: Summarize Your Assets		
		Your a	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	169,400.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	57,949.04
	1c. Copy line 63, Total of all property on Schedule A/B	\$	227,349.04
Pa	t 2: Summarize Your Liabilities		
			iabilities at you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column AAmount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	316,330.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e &chedule E/F	\$	5,935.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j & chedule E/F	\$	142,622.16
	Your total liabilities	\$	464,887.16
Pa	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income(Official Form 106I) Copy your combined monthly income from line 12 oSchedule I	\$	5,418.95
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	8,017.20
Pa	Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your ot	her schedu	ıles.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C§ 159.	ersonal, fai	mily, or household
	Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this ho	x and sub	mit this form to the

Official Form 106Sum

court with your other schedules.

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Debtor 1 Mitchell, Jennifer A. Case number (if known) 3:20-bk-20319

8. **From the** Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$______\$

O. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total	claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	5,935.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	102,519.82
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	108,454.82

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	in this information to identify your ca								
Del	btor 1 Jennifer A.	Mitchell			_				
	btor 2				_				
Uni	ited States Bankruptcy Court for the	: DISTRICT OF NEW .	JERSEY, TRENTON	DIVISION	_				
	3:20-bk-20319		-			Check if this is An amende A supplem	ed filing ent showin		chapter 13
\bigcirc	fficial Form 106I					income as		wing date:	
	chedule I: Your Inc	omo				MM / DD/ `	/YYY		12/1
spo atta	plying correct information. If you use. If you are separated and you ch a separate sheet to this form. On the Describe Employment	r spouse is not filing wit	h you, do not inclu	de informa	atior	about your spou	se. If mor	e space is ne	eded,
1.	Fill in your employment information.		Debtor 1			Debtor :	2 or non-f	iling spouse	
	If you have more than one job,	Employment status	■ Employed	■ Employed			☐ Employed		
	attach a separate page with information about additional	Employment status	☐ Not employed			■ Not e	■ Not employed		
	employers.	Occupation	Legal Secreta	ry		Unemp	loyed		
	Include part-time, seasonal, or self-employed work.	Employer's name	Straffi & Straff	fi, LLC					
	Occupation may include student of homemaker, if it applies.	or Employer's address	670 Commons Toms River, N		643	1			
		How long employed the	nere? <u>28 yea</u>	ars					
Pai	rt 2: Give Details About Mor	nthly Income							
	mate monthly income as of the dass you are separated.	ate you file this form. If y	ou have nothing to re	eport for any	/ line	e, write \$0 in the sp	ace. Includ	de your non-filir	ng spouse
	u or your non-filing spouse have mor ce, attach a separate sheet to this for		oine the information f	or all emplo	yers	for that person on	the lines b	oelow. If you ne	eed more
						For Debtor 1		ebtor 2 or ling spouse	
2.	List monthly gross wages, salar deductions). If not paid monthly, c			2.	\$	6,916.67	\$	0.00	
3.	Estimate and list monthly overt	ime pay.		3.	+\$	0.00	+\$	0.00	
4.	Calculate gross Income. Add lin	e 2 + line 3.		4.	\$	6,916.67	\$	0.00	

Official Form 106l Schedule I: Your Income page 1

Copy line 4 here 4. \$ 5,5916.67 \$ 0.000 5. List all payroll deductions: 5a. Tax, Medicare, and Social Security deductions 5b. Mandatory contributions for retirement plans 5b. Mandatory contributions for retirement plans 5c. \$ 1,460.32 \$ 0.00 5c. Voluntary contributions for retirement plans 5c. \$ 345,84 \$ 0.00 5d. Required repayments of retirement fund loans 5d. \$ 423,56 \$ 0.00 5d. Required repayments of retirement fund loans 5d. \$ 423,56 \$ 0.00 5d. Required repayments of retirement fund loans 5d. \$ 423,56 \$ 0.00 5d. Social Security 6d. \$ 0.00 \$ 0.00 5d. Insurance 5d.	Debt	or 1	Mitchell, Jennifer A.		Case r	number (if known)	3:20-bk-2	0319
Section Sec					For	Debtor 1		
5. List all payroll deductions: 5a. Tax, Medicare, and Social Security deductions 5b. Mandatory contributions for retirement plans 5c. Voluntary contributions for retirement plans 5c. Voluntary contributions for retirement plans 5c. Voluntary contributions for retirement plans 5d. Sad.584 \$ 0.00 5d. Required repayments of retirement fund loans 5d. Sad.584 \$ 0.00 5d. New York Sad.584 \$ 0.00 5d. Dinor Medicare Sad.584 \$ 0.00 5d. Dinor Medicare Sad.584 \$ 0.00 5d. Dinor duce 5d. Add the payroll deductions. And lines 5a+5b+5c+5d+5e+5f+5g+5h. 6d. Sad.584 \$ 0.00 5d. Dinor duce 5d. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7d. Sad.585 \$ 0.00 5d. Dinor duce 8a. Net income from trental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly in et income. 8b. Interest and dividends 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. Sad. Dinor duce duce has sessistance that you regularly receive include alimony, spousal support, property settlement. 8d. Unemployment compensation 8d. Sad. Dinor government assistance that you regularly receive include alimony, spousal susport, property settlement. 8d. Sad. Dinor government assistance has you requirely receive include alimony, spousal support, property settlement. 8d. Sad. Dinor government assistance has you requirely receive include alimony, spousal support, property settlement. 8d. Sad. Dinor government assistance of the value (if known) of any non-		Cop	y line 4 here	4.	\$	6,916.67		
58. Tax, Medicare, and Social Security deductions 56. \$ 0.00 \$ 0.00	5.	List						
Second		_		5a.	\$	1 460 32	\$	0.00
5c. Voluntary contributions for retirement plans 5d. Required repayments of retirement fund loans 5d. Required repayments of retirement fund loans 5d. Squared Squar					· —			
5d. Required repayments of retirement fund loans 5e. Insurance 5e. \$0.00 5e. Union dues 5f. Domestic support obligations 5f. \$0.00 5g. Union dues 5f. \$0.00 5g. \$0.00		5c.	Voluntary contributions for retirement plans	5c.	\$		\$	
5g. Union dues 5g. U		5d.	Required repayments of retirement fund loans	5d.	\$		\$	
5g. Union dues 5g. Chief deductions. Specify: 5g. \$ 0.00 5h. + \$ 0.00		5e.	Insurance	5e.	\$	0.00	\$	0.00
5h. Other deductions. Specify: 6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+6l+5g+5h. 6. \$ 2,229.72 \$ 0.00 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$ 4,686.95 \$ 0.00 8. List all other income regularly received: 8. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts. ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filling spouse, or a dependent regularly receive include alimony, spousal support, child support, maintenance, divorce settlement, and properly settlement. 8c. \$ 0.00 \$ 0.00 8d. Unemployment compensation 8d. \$ 0.00 \$ 0.00 8e. Social Security 8f. Other government assistance that you regularly receive include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stange (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. 8p. Pension or retirement income 8h. Other monthly income. Specify: Vehicle Reimbursement 8h. \$ 732.00 \$ 0.00 9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 732.00 \$ 0.00 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other firefines or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies Combined monthly income				5f.	\$		\$	
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Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 12. Combined monthly income 13. Do you expect an increase or decrease within the year after you file this form?	9.	Add		9.	\$		\$	
Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 12. Combined monthly income 13. Do you expect an increase or decrease within the year after you file this form?	10	Calc	culate monthly income. Add line 7 ± line 0	10 6		119 05 .	0.00	\$ 5 449 QF
Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in <i>Schedule J</i> . Specify: 11. +\$ 0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the <i>Summary of Schedules</i> and <i>Statistical Summary of Certain Liabilities</i> and Related <i>Data</i> , if it applies 12. Combined monthly income 13. Do you expect an increase or decrease within the year after you file this form?	10.			10.		0,410.33 ⁺ Ψ.	0.00	J - \$\psi \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 12. Combined monthly income 13. Do you expect an increase or decrease within the year after you file this form? No.	11.	Incluother Do n	de contributions from an unmarried partner, members of your household, your de r friends or relatives. ot include any amounts already included in lines 2-10 or amounts that are not av	ependen			Schedule J.	. +\$0.00
13. Do you expect an increase or decrease within the year after you file this form? No	12.							
	13.	_ `	•	?				
				benefi	ts.			

Official Form 106l Schedule I: Your Income page 2

Fill in	this information to identify your case:		l		
Debto			Che	ck if this is: An amended filing	
Debto (Spou	or 2			A supplement show expenses as of the	ing postpetition chapter 13 following date:
``	d States Bankruptcy Court for the: DISTRICT OF NEW JERSEY, T DIVISION	TRENTON		MM / DD / YYYY	
Case (If kno	number 3:20-bk-20319				
	ficial Form 106J hedule J: Your Expenses		ı		4044
Be as	s complete and accurate as possible. If two married people a mation. If more space is needed, attach another sheet to this nown). Answer every question.	re filing together, bot s form. On the top of a	h are equal any addition	ly responsible for s nal pages, write you	12/15 supplying correct ir name and case number
Part 1	Describe Your Household Is this a joint case?				
	■ No. Go to line 2. □ Yes. Does Debtor 2 live in a separate household?				
	. □ No □ Yes. Debtor 2 must file Official Form 106J-2, Expense	es for Separate Househ	noldof Debto	r 2.	
2.	Do you have dependents? ☐ No				
	Do not list Debtor 1 and Debtor 2. Fill out this information for each dependent	Dependent's relation		Dependent's age	Does dependent live with you?
	Do not state the dependents names.	Son		25	□ No ■ Yes □ No
		Son		23	□ No ■ Yes □ No
		Daughter		18	■ Yes
2	Do your expenses include ■ No	Son's Fiance			□ No ■ Yes
(expenses of people other than yourself and your dependents?				
Part 2					
expe	nate your expenses as of your bankruptcy filing date unless nses as of a date after the bankruptcy is filed. If this is a sup icable date.				
value	ide expenses paid for with non-cash government assistance e of such assistance and have included it on Schedule I: You cial Form 106I.)	•		Your expo	enses
	The rental or home ownership expenses for your residence. payments and any rent for the ground or lot.	Include first mortgage	4.	\$	2,069.16
ı	If not included in line 4:				
	4a. Real estate taxes		4a.	\$	0.00
	4b. Property, homeowner's, or renter's insurance		4b.	·	0.00
	Home maintenance, repair, and upkeep expenses Homeowner's association or condominium dues		4c.	:	250.00
	Additional mortgage payments for your residence, such as h	ome equity loans	4d. 5	·	0.00 400.00

6b. Water, sewer, garbage collection 6c. Telephone, cell phone, Internet, satellite, and cable services 6d. Other. Specify: NJ Energy Solar Panels Food and housekeeping supplies Childcare and children's education costs Clothing, laundry, and dry cleaning Personal care products and services Medical and dental expenses Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. Entertainment, clubs, recreation, newspapers, magazines, and books Charitable contributions and religious donations	6a. 6b. 6c. 6d. 7. 8. 9. 10.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	325.00 0.00 370.00 125.00 850.00
6b. Water, sewer, garbage collection6c. Telephone, cell phone, Internet, satellite, and cable services	6b. 6c. 6d. 7. 8. 9.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	0.00 370.00 125.00
6c. Telephone, cell phone, Internet, satellite, and cable services 6d. Other. Specify: NJ Energy Solar Panels Food and housekeeping supplies Childcare and children's education costs Clothing, laundry, and dry cleaning Personal care products and services Medical and dental expenses Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. Entertainment, clubs, recreation, newspapers, magazines, and books Charitable contributions and religious donations	6c. 6d. 7. 8. 9.	\$ \$ \$ \$	370.00 125.00
6d. Other. Specify: NJ Energy Solar Panels Food and housekeeping supplies Childcare and children's education costs Clothing, laundry, and dry cleaning Personal care products and services Medical and dental expenses Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. Entertainment, clubs, recreation, newspapers, magazines, and books Charitable contributions and religious donations	- 6d. 7. 8. 9. 10.	\$ \$ \$	125.00
Food and housekeeping supplies Childcare and children's education costs Clothing, laundry, and dry cleaning Personal care products and services Medical and dental expenses Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. Entertainment, clubs, recreation, newspapers, magazines, and books Charitable contributions and religious donations	7. 8. 9. 10.	\$ 5	125.00
Food and housekeeping supplies Childcare and children's education costs Clothing, laundry, and dry cleaning Personal care products and services Medical and dental expenses Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. Entertainment, clubs, recreation, newspapers, magazines, and books Charitable contributions and religious donations	8. 9. 10.	\$	
Childcare and children's education costs Clothing, laundry, and dry cleaning Personal care products and services Medical and dental expenses Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. Entertainment, clubs, recreation, newspapers, magazines, and books Charitable contributions and religious donations	9. 10.	·	
Clothing, laundry, and dry cleaning Personal care products and services Medical and dental expenses Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. Entertainment, clubs, recreation, newspapers, magazines, and books Charitable contributions and religious donations	9. 10.	·	0.00
Personal care products and services Medical and dental expenses Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. Entertainment, clubs, recreation, newspapers, magazines, and books Charitable contributions and religious donations	10.		250.00
Medical and dental expenses Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. Entertainment, clubs, recreation, newspapers, magazines, and books Charitable contributions and religious donations		\$	120.00
Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. Entertainment, clubs, recreation, newspapers, magazines, and books Charitable contributions and religious donations		·	200.00
Do not include car payments. Entertainment, clubs, recreation, newspapers, magazines, and books Charitable contributions and religious donations		Ψ	200.00
Entertainment, clubs, recreation, newspapers, magazines, and books Charitable contributions and religious donations	12.	\$	630.00
Charitable contributions and religious donations	13.	\$	120.00
<u> </u>	14.	\$	50.00
		· -	
Do not include insurance deducted from your pay or included in lines 4 or 20.			
15a. Life insurance	15a.	\$	0.00
15b. Health insurance	15b.	\$	0.00
15c. Vehicle insurance	15c.	\$	160.00
15d. Other insurance. Specify:	15d.	\$	0.00
Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.	_	-	
Specify:	16.	\$	0.00
Installment or lease payments:	_		
17a. Car payments for Vehicle 1	17a.	\$	430.00
17b. Car payments for Vehicle 2	17b.	\$	710.04
17c. Other. Specify: Student Loans	17c.	\$	370.00
17d. Other. Specify:	- 17d.	\$	0.00
Your payments of alimony, maintenance, and support that you did not report as	-		
deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0.00
Other payments you make to support others who do not live with you.		\$	0.00
Specify:	19.		
Other real property expenses not included in lines 4 or 5 of this form or on Schedule	I: You	r Income.	
20a. Mortgages on other property	20a.	\$	0.00
20b. Real estate taxes	20b.	\$	0.00
20c. Property, homeowner's, or renter's insurance	20c.	\$	0.00
20d. Maintenance, repair, and upkeep expenses	20d.	\$	0.00
20e. Homeowner's association or condominium dues	20e.	\$	0.00
Other: Specify: Maintenance Fees on Timeshare	21.	·	89.00
Spouse Credit Card Payments		+\$	200.00
	_	+\$	
Spouse Student Loan	-	ΤΨ	299.00
Calculate your monthly expenses			
22a. Add lines 4 through 21.		\$	8,017.20
22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
22c. Add line 22a and 22b. The result is your monthly expenses.		\$	8,017.20
Calculate your monthly net income.		•	
23a. Copy line 12 (your combined monthly income) from Schedule I.	23a.	•	5,418.95
23b. Copy your monthly expenses from line 22c above.	23b.	-\$	8,017.20
23c. Subtract your monthly expenses from your monthly income.	220	œ.	-2,598.25
The result is your monthly net income.	∠3C.	Ψ	-2,330.23
The result is your <i>monthly net income</i> . Do you expect an increase or decrease in your expenses within the year after you file For example, do you expect to finish paying for your car loan within the year or do you expect your monodification to the terms of your mortgage? ☐ No. ☐ Yes. ☐ Explain here: Non Debtor Spouse is pending unemployment I	rtgage p	eayment to incre	

Fill in this info	ormation to identify y	our case:			
Debtor 1	Jennifer A. Mitcl				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ban	kruptcy Court for the:	DISTRICT OF NEW JER	RSEY, TRENTON DIVI	SION	
Case number 3	:20-bk-20319				☐ Check if this is an amended filing
Official Form	106Dec				
Declarati	on About	an Individual	Debtor's S	Schedules	12/15
obtaining money o years, or both. 18		n connection with a bankr			nent, concealing property, or , or imprisonment for up to 20
Did you pay	or agree to pay some	eone who is NOT an attorn	ey to help you fill out	bankruptcy forms?	
■ No					
☐ Yes. Na	ame of person				kruptcy Petition Preparer's Notice, , and Signature (Official Form 119)
	y of perjury, I declare true and correct.	that I have read the summ	nary and schedules fil	ed with this declaration	and
	ifer A. Mitchell		x		
	r A. Mitchell of Debtor 1		Signature	of Debtor 2	

Date March 8, 2022